State of Wisconsin Department of Natural Resources Bureau of Watershed Management PO Box 7921, Madison WI 53707-7921 dnr.wi.gov

## Watershed Adaptive Management Request

Form 3200-139 (1/12)

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**Notice:** Pursuant to s. NR 217.18, Wis. Adm. Code, this form must be completed and submitted to the Department at the time of the reissuance of an existing WPDES (Wisconsin pollutant discharge elimination system) permit to request adaptive management for phosphorus water quality based effluent limits (WQBEL). Failure to provide all requested information may result in denial of your request. Personal information collected will be used for administrative purposes and may be provided to requestors to the extent required by Wisconsin Open Records law [ss. 19.31-19.39, Wis. Stats.].

Type of Request:											
✓ This is the t	ormal adar	otive ma	nagem	ent request	t as requ	uired i	n s. N	IR 21	7.18(2)		
										ty planning.)	
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Facility and Permit Info	mation				<u></u>		M/DI	TE D	resif Na	.,	
Mukwonago							WPDES Permit No. <b>WI -</b> 0020265-09				
Facility Address				City				002	State	ZIP Code	
1200 Holz Parkway				Mukwonago					WI	53149	
Receiving Water				<u> ł '</u>						1 00.10	
Fox River (IL)											
Owner Contact Information	ion								•		
Last Name First Name			me	MI				Phone No. (Incl. area code)			
Brown						414	4-550-2509				
Street Address							FAX	Numb	er		
440 River Crest Court											
,			State	.				address			
Mukwonago Wi			WI	53149 dbrown@				villageofmukwonago.com			
Facility Information										1 10 1000	
Provide listed information for ea											
Required for AM Request	Wis. Adm Code R	- 1	Conclusion				Evidence/Source of information (attach as needed)				
1. NPS contribute at least	s. NR 217		☑ NPS contributes at least 50%				PRESTO LITE				
50% of total P contribution			☐ NPS DOES NOT contribute at								
				least 50%							
2, WQBEL Requires Filtration s. NR 217.18(2)(c)			☑ Filtration required								
				☐ Filtration NOT required						•	
3. AM Plan	s. NR 217.18(2)(d)			Plan is Included - Page 3							
				☑ Plan is NOT Included							
				For a preliminary adaptive management request, AM plan not required							
Facility Operation and P	erforman	CA	برومولوسوس برومولوسوس	promition to							

1. Current P removal capability – If the facility is currently required by a WPDES permit to monitor effluent phosphorus (P) provide a summary of the influent and effluent annual average P concentrations for each of the past three (3) years. If permit required P data is not available, the applicant should provide any other P data that may be applicable and available. If no data is available, the Department may estimate the P effluent concentration by based on data from other similar facilities.

Influent phosphorus data is not monitored by the WWTF. Influent values are typically 5 to 6 mg/L. Effluent values are shown on the attached graph. Notes on the graph show optimization activities since July of 2018.

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Facility Operation - Provide a summary description of overall facility operation. If not a continuously discharging facility, describe storage procedures and the time periods when effluent discharge occurs.

The facility is a conventional activated sludge plant. Processes include metering, screening, influent pumping, grit removal, primary clarification, aeration, final clarification, UV disinfection and effluent pumping. Solids are anaerobically digested and dewatered using sand drying beds. Phosphorus removal is through using a ferric chloride PAC coagulant introduced at the aeration basin.

Previous Studies - Reference or attach any facility planning or evaluation study that evaluated facility performance capabilities (Note - Only include studies that are recent, within 5 years, or otherwise applicable for the evaluation of the existing facility and current conditions).

Previous studies include the Operational Evaluation Report (March 2013), Phosphorus Evaluation Report (March 2016), and the Preliminary Compliance Alternatives Report (March 2018).

#### Adaptive Management Plan (s. NR 217,18(d))

This section should summarize the Adaptive Management Plan for Internal and external review. A complete Adaptive Management Plan should be attached. Note: If this is a preliminary adaptive management request, this section is not required.

Percent Contribution of Applicant Discharge

Upper and Middle Fox River (IL)

Approximately 3%

Action Area (include map)

#### See Attached

Watershed

Watershed Characteristics and Timeline Justification

The two watersheds combined are 299 square miles in area, have 534 stream miles, have 9.717 acres of lake area, and have 34,799 acres of wetlands.

#### **Key Proposed Actions**

Streambank stabilization, agricultural runoff reduction, wastewater treatment facility reductions in discharged phosphorus.

#### Key Goals and Measures for Determining Effectiveness

The main goal of the program is to bring the Fox River into compliance with the water quality criterean for phosphorus of 0.1 mg/L total phosphorus. The Village and other partners will be monitoring water quality at the Point of Compliance and other key locations from May through October

Southeastern Wisconsin Fox River Commission, Southeastern Wisconsin Regional Planning Commission, Waukesha County, Wisconsin, Department of Natural Resources

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**Funding Sources** 

Village of Mukwonago

## Adaptive Management Request and Certification

Based on the information provided, I am requesting the Watershed Adaptive Management option to achieve compliance with phosphorus water quality standards in accordance with s. NR 217.19, Wis. Adm. Code. I certify that the information provided with this request is true, accurate and complete to the best of my knowledge.

Print or type name of person submitting request*	Title
Dave Brown	Utilities Director
Signature of Official	Date Signed 3 - 2-7- 19
*Must be an Adhorized Representative for the treatment facility	